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Box ISSUE FEE  
Assistant Commissioner for Patents  
Washington, D.C. 20231

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FAY, SHARPE, BEALL, FAGAN, MINNICH & MCKEE

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

RICHARD J MINNICH  
FAY SHARPE BEALL FAGAN MINNICH & MCKEE  
SUITE 700  
CLEVELAND OH 44114-2518

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**Certificate of Mailing**

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Express Mail No. EL181701043

Sally A. Wohlford (Depositor's name)

Sally A. Wohlford (Signature)

January 4, 1999 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/820,756	03/19/97	022	FREAY, C	10/14/98
First Named Applicant	35 USC 154(b) term ext. = 0 Days.			
GOLDING.				

**TITLE OF INVENTION** ROTODYNAMIC PUMP WITH NON-CIRCULAR HYDRODYNAMIC BEARING JOURNAL

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPL. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3 CCL2178	417-423.120	K47	UTILITY	YES	\$660.00	01/14/99

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent from page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. FAY, SHARPE,  
2. BEALL, FAGAN,  
3. MINNICH & MCKEE

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  
**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE The Cleveland Clinic Foundation

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Cleveland, Ohio

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☒ Issue Fee  
☐ Advance Order - # of Copies

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 06-0308  
(ENCLOSE AN EXTRA COPY OF THIS FORM)

☐ Issue Fee  
☒ Advance Order - # of Copies -10-

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

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"DOCKETED"

TRANSMIT THIS FORM WITH FEE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Leonard A. R. Golding et al.  
Serial No. : 08/820,756  
Filed : March 19, 1997  
Title : ROTODYNAMIC PUMP WITH NON-  
CIRCULAR HYDRODYNAMIC BEARING  
JOURNAL  
Batch No. : K47  
Group Art Unit : 3746  
Examiner : C. Freay  
Attorney Docket : CCL 2 178

Assistant Commissioner For Patents  
Washington, D.C. 20231

**BOX ISSUE FEE**

PAYMENT OF ISSUE FEE  
UNDER 37 C.F.R. §1.311

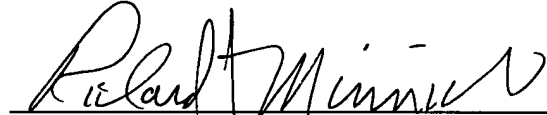
Dear Sir:

1. Applicants hereby pay the Issue Fee for the attached Issue Fee Transmittal PTOL-85.
2. Fee (37 C.F.R. §1.18(a))  
Application status is:
  - ☒ Small Business Entity -- Fee \$605.00.
  - ☐ Verified Statement attached.
  - ☒ Verified Statement filed on March 19, 1997.
  - ☐ Other than Small Entity -- Fee \$1,210.00.

3. Payment of Fee

- ☒ Enclosed please find a check for \$605.00.
- ☒ Charge Account 06-0308 for any fee deficiency.
- ☐ Charge Account 06-0308 the sum of \$\_\_\_\_\_.

Respectfully submitted,




Richard J. Minnich  
Reg. No. 24,175

FAY, SHARPE, BEALL, FAGAN,  
MINNICH & McKEE  
1100 Superior Avenue  
Seventh Floor  
Cleveland, Ohio 44114-2518  
(216) 861-5582

CERTIFICATE OF MAILING

I hereby certify that this Payment of Issue Fee Under 37 C.F.R. §1.311 is being deposited with the United States Postal Service as Express Mail No. EL181701043 addressed to: Assistant Commissioner For Patents, Washington, D.C. 20231, on January 4, 1999.



Sally A. Wohlford

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Leonard A. R. Golding et al.  
Serial No. : 08/820,756  
Filed : March 19, 1997  
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Assistant Commissioner For Patents  
Washington, D.C. 20231

**BOX ISSUE FEE**

REQUEST FOR CORRECTED ISSUE FEE TRANSMITTAL (PTOL-85B)

Dear Sir:

1. Attached is a copy of the Issue Fee Transmittal (PTOL-85B) received from the PTO in the above application for which correction is respectfully requested.
2. There is an error in that the following data is:

- ☒ incorrectly entered  
and/or
- ☐ omitted
  - ☒ Applicant's name
  - ☐ Applicant's address
  - ☐ Title
  - ☐ Filing Date
  - ☐ Serial Number
  - ☐ Foreign/PCT Application Reference
  - ☐ Other \_\_\_\_\_

in that the Issue Fee Form (PTOL-85B) should read as follows:

**GOLDING, Leonard A. R.**

3. ☒ The correction is not due to any error by Applicant and no fee is due

OR

☐ The correction is due to Applicant's error and the fee therefor under 37 C.F.R. §1.19(h) of \$25.00 is paid as follows:

- ☐ enclosed is a check for \$25.00
- ☐ charge Deposit Account  
No. 06-0308 in the amount  
of \$25.00

Respectfully submitted,



Richard J. Minnich  
Reg. No. 24,175

FAY, SHARPE, BEALL, FAGAN,  
MINNICH & MCKEE  
1100 Superior Avenue  
Seventh Floor  
Cleveland, Ohio 44114-2518  
(216) 861-5582

CERTIFICATE OF MAILING

I hereby certify that this Request for Corrected Issue Fee Transmittal (PTOL-85B) is being deposited with the United States Postal Service as Express Mail No. EL181701043 addressed to: Assistant Commissioner For Patents, Washington, D.C. 20231, on January 9, 1999.

  
Sally A. Wohlford